

FOOD ASSISTANCE EMPLOYER CONTACT RECORD

ES-4306F

01-12

Name: _____ Case # _____ Number of contacts due: _____ Contacts made: _____

Case worker: _____ Telephone #: _____ Date contact record given: _____

Use this form to keep track of your job search contacts. Your contacts will be verified by your case worker. Attach a confirmation sheet for each on-line application and a transmission sheet for each fax application. You must let your worker know if you are offered a job or if you accept a job.

You may visit your local work force development office for complete job listings in your area. If you do not know where the office is located, please ask your case worker or DCF office customer service representative for information.

On-line job resources - Check on-line for your city web site to see local listings or try one of these:

jobs.aol.com Job.com monster.com findtherightjob.com snagajob.com
usjobresource.com careerbuilder.com jobs.ks.gov jobs-resource.com

DATE of contact		Employer contact Name, Address, Contact Person and Telephone #	Application type			Agency verification
			Fax/Mail	On-line	In person	
1						
2						
3						
4						
5						
6						
7						
8						
9						

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DATE		Employer Contact Name, Address, Contact Person and Telephone #	Fax/Mail	On-line	In person	Agency verification
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
TOTALS						

My signature below certifies the information on this form is correct to the best of my knowledge.

Signed:_____ **Date:**_____